

Cost Savings Through Increased Local Efficiency

A Regional Approach

Discussion Points

- Current regionalization of services
- Opportunities for expanded regionalization
- County level opportunities for efficiency
- Long-term cost-saving opportunities

Current Regionalization of Services

- Guidance Services – Program/Staff is Regional
- Early Intervention – Staff is Regional
- Nutritionist Services – Staff is Regional
- Sanitarians – Staff is Regional
- Children First – Staff may be Regional
- EPRS/LERCs – Staff and MIPS plans are Regional
- Health Education – Staff are Regional
- Administrative Teams - (RD, APO, BM, AC)
- IFCs – Staff is Regional
- ARNP Coverage – Staff is Regional

Opportunities for Expanded Regionalization

- Redesign C1/Parent Pro into a hub system similar to Guidance
- Explore Tele-Nutrition to enhance WIC services
- CDN back-up provided via hub, eliminating need for two nurses in all counties.
- ARNP services provided via regional hub, with other FP interventions provided at all locations (Requires Title X Approval)

County Level Opportunities for Efficiencies

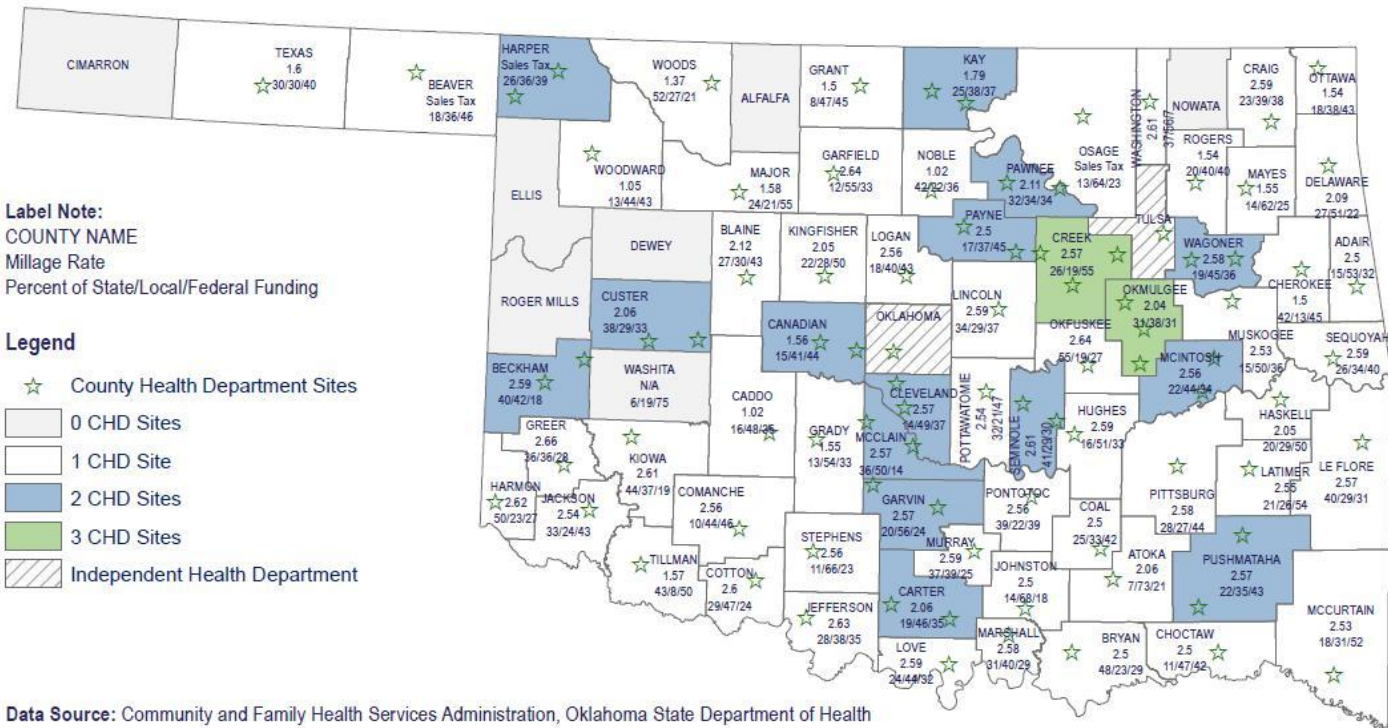
- Consider the level of PH services relative to funding breakdown.
 - 15 counties below 2 mills
 - 9 counties below 2.5 mills
 - 3 counties operate under a sales tax only
 - 6 counties below 2.5 mills operate multiple sites
 - 20 counties operate with less than 30% local revenue not considering LEP
 - Average local revenue per county not including LEP – 39%
 - 12 Counties operate with less than 40% local revenue including LEP expenses
 - Average local revenue per county including LEP – 49%
 - 11 counties operate with greater than 40% state revenue not considering LEP
 - Average state revenue per county not including LEP – 24%
 - 14 counties operate with greater than 30% state revenue when including LEP
 - Average state revenue per county including LEP – 20%

Note 1: Lower millage does not necessarily reflect low local or high state budget %

Note 2: Due to the complexity of local funding streams and the unique nature of CHDs role as a part of county government, we do not recommend budgeting by a set formula for state/local/federal revenue.

Note 3: The revenue numbers presented here are based on the 2015 fiscal budgets. Current percentages could vary based on budget adjustments made over recent months.

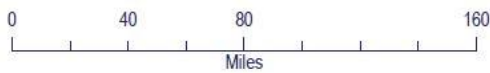
County Health Department Revenue Information



Data Source: Community and Family Health Services Administration, Oklahoma State Department of Health

Created: 02.18.2016 Updated: 02.18.2016

Projection/Coordinate System: USGS Albers Equal Area Conic

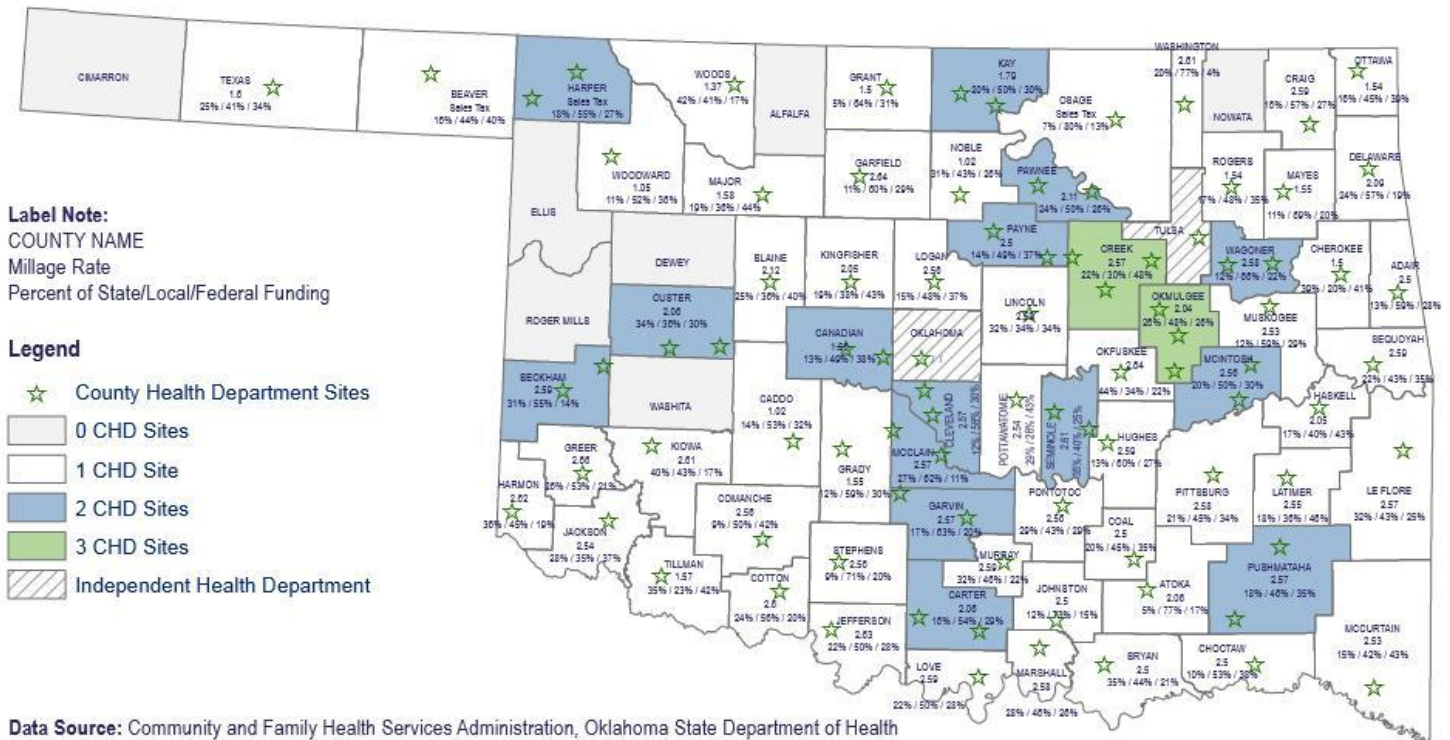


Disclaimer: This map is a compilation of records, information and data from various city, county and state offices and other sources, affecting the area shown, and is the best representation of the data available at the time. The map and data are to be used for reference purposes only. The user acknowledges and accepts all inherent limitations of the map, including the fact that the data are dynamic and in a constant state of maintenance.



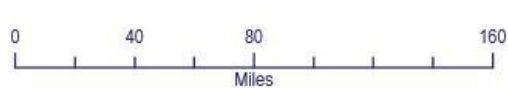
Community Epidemiology and Evaluation
Community and Family Health Services
Oklahoma State Department of Health

County Health Department Revenue Information Including Local Expenditure Program



Created: 02.18.2016 **Updated:** 02.29.2016

Projection/Coordinate System: USGS Albers Equal Area Conic



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Community Epidemiology and Evaluation
Community and Family Health Services
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CHD with Satellite Locations

• Beckham



[2.59m; 40/42/18 (non-LEP)] [2.59m; 31/55/14 (LEP)]

• Elk City:	2014 – 30,444	2015 – 26,875
• Sayre:	2014 – 10,838	2015 – 10,329

• Canadian



[1.56m; 15/41/44 (non-LEP)] [1.56m; 13/49/38 (LEP)]

• El Reno:	2014 – 39,137	2015 – 33,750
• Yukon:	2014 – 51,430	2015 – 54,871

• Carter



[2.06m; 19/46/35 (non-LEP)] [2.06m; 16/54/29 (LEP)]

• Ardmore:	2014 – 43,863	2015 – 41,654
• Healdton*:	2014 – 5,224	2015 – 5,586

• Cleveland



[2.57m; 14/49/37 (non-LEP)] [2.57m; 12/58/30 (LEP)]

• Moore:	2014 – 77,647	2015 – 87,345
• Norman:	2014 – 100,199	2015 – 99,521

CHD with Satellite Locations

• Creek

[2.57m; 26/19/55 (non-LEP)] [2.57m; 22/30/48 (LEP)]



• Bristow:	2014 – 13,154	2015 – 13,023
• Drumright*:	2014 – 6,002	2015 – 5,286
• Sapulpa:	2014 – 63,388	2015 – 62,976

• Custer

[2.06m; 38/29/33 (non-LEP)] [2.06m; 34/36/30 (LEP)]



• Clinton:	2014 – 21,376	2015 – 22,864
• Weatherford:	2014 – 16,523	2015 – 16,954

• Garvin

[2.57m; 20/56/24 (non-LEP)] [2.57m; 17/63/20 (LEP)]



• Lindsay*:	2014 – 7,687	2015 – 7,105
• Pauls Valley:	2014 – 23,878	2015 – 22,946

• Harper

[sales tx; 26/36/39 (non-LEP)] [sales tx; 18/55/27 (LEP)]



• Buffalo*:	2014 – 1,881	2015 – 1,647
• Laverne*:	2014 – 2,377	2015 – 2,447

CHD with Satellite Locations

- Kay

[1.79m; 25/38/37 (non-LEP)] [1.79m; 20/50/30 (LEP)]

- Blackwell: 2014 – 11,116 2015 – 10,542
- Ponca City: 2014 – 47,548 2015 – 47,334



- McClain

[2.57m; 36/50/14 (non-LEP)] [2.57m; 27/62/11 (LEP)]

- Blanchard: 2014 – 7,875 2015 – 9,530
- Purcell: 2014 – 11,056 2015 – 10,161



- McIntosh

[2.56m; 22/44/34 (non-LEP)] [2.56m; 20/50/30 (LEP)]

- Checotah: 2014 – 10,463 2015 – 9,090
- Eufaula: 2014 – 9,752 2015 – 9,285



- Okmulgee

[2.04m; 31/38/31 (non-LEP)] [2.04m; 26/48/26 (LEP)]

- Beggs*: 2014 – 1,301 2015 – 1,177
- Henryetta*: 2014 – 4,612 2015 – 3,938
- Okmulgee: 2014 – 21,351 2015 – 20,212



CHD with Satellite Locations

• Pawnee

[2.11m; 32/34/34 (non-LEP)] [2.11m; 24/50/26 (LEP)]

- Cleveland*: 2014 – 8,856 2015 – 10,612
- Pawnee*: 2014 – 6,718 2015 – 5,729



• Payne

[2.50m; 17/37/45 (non-LEP)] [2.50m; 14/49/37 (LEP)]

- Cushing: 2014 – 11,807 2015 – 9,649
- Stillwater: 2014 – 53,872 2015 – 48,910



• Pushmataha

[2.57m; 22/35/43 (non-LEP)] [2.57m; 18/46/35 (LEP)]

- Antlers: 2014 – 11,222 2015 – 10,699
- Clayton*: 2014 – 2,096 2015 – 1,280



• Seminole

[2.61m; 41/29/30 (non-LEP)] [2.61m; 35/40/25 (LEP)]

- Seminole: 2014 – 28,711 2015 – 23,500
- Wewoka*: 2014 – 10,089 2015 – 9,055



CHD with Satellite Locations

- Wagoner

[2.58m; 19/45/36 (non-LEP)] [2.58m; 12/66/22 (LEP)]



- Coweta: 2014 – 13,401 2015 – 12,538
- Wagoner: 2014 – 13,112 2015 – 12,281

Other Considerations

- Unique situations do exist in each county.
- Political pressure is relevant at the county level.
- Cost shifting may have occurred to support projects.
- There is no better time to argue for reduction or closure than during a budget crisis.
- Arguments can be strengthened via shifting budgets.
- A menu of services may need to be established.

Long Term State Cost-Savings Possibilities

- Reorganize some regional staff into local organizations/budgets
 - Turning Point – Absorb into local org to reduce duplication, increase synergy.
 - Regional EPRS - Focus on LERCs to ensure EPRS mission.
 - EI – Blur EI boundaries for hard to recruit positions.
 - Immunizations - Eliminate IFCs in favor of RICs, since IFCs have become compliance focused, and no longer support increasing rates.
 - Accreditation Coordinators may need to be utilized in a broader capacity than currently identified. In some areas, where accreditation is not feasible or affordable, the ACs may need to be used more as an APO to provide greater support for traditional CHD functions.
 - Flexibility through attrition – Evaluate each position/program as positions vacate.